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** CONTINUING DATA *****

none EK 10 MAY 2005

** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 3	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>E. Hoenderop</i> Initials <i>EK</i>				

ADDRESS

25628
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TITLE

Dental material container

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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